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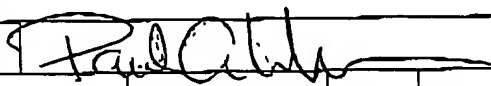
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DECLARATION							
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designated the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S. Parent Application Number		PCT Parent Number		Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
10/279,405 09/679,841				10/24/2002 10/05/2000			
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.							
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:							
Name		Registration Number		Name		Registration Number	
Daniel D. Fetterley		20,323		Joseph D. Kuborn		40,689	
George H. Solveson		25,927		Jeffrey S. Sokol		35,686	
Gary A. Essmann		29,376		William L. Falk		27,709	
Thomas M. Wozny		28,922		Aaron T. Olejniczak		54,853	
Michael E. Taken		28,120		Peter T. Holsen		54,180	
Joseph J. Jochman, Jr.		25,058					
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.							
Please direct all correspondence to:							
<input checked="" type="checkbox"/> Customer Number or Bar Code Label				26753		<input checked="" type="checkbox"/> Correspondence address below	
NAME		Joseph D. Kuborn (Reg. No. 40,689)					
		ANDRUS, SCEALES, STARKE & SAWALL, LLP					
ADDRESS		100 East Wisconsin Avenue					
		Suite 1100					
CITY		Milwaukee		STATE		Wisconsin	
						ZIP CODE 53202-4178	
COUNTRY		U.S.A.		TELEPHONE		(414) 271-7590	
						FAX (414) 271-5770	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname			
Bradley G.				Trimble			
Inventor's Signature				Date			
RESIDENCE: City		Milwaukee		State		WI	
				Country		USA	
Citizenship		USA					
POST OFFICE ADDRESS		2544 South Shore Drive					
City		Milwaukee		State		WI	
				Zip		53207	
				Country		USA	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.							

Please type a plus sign (+) inside this box [+]

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet				
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))					Family Name or Surname				
Lance A.					Ehrke				
Inventor's Signature					Date				
RESIDENCE: City	Brookfield	State	WI	Country	USA	Citizenship	USA		
POST OFFICE ADDRESS		18305 Benington Drive							
City	Brookfield	State	WI	Zip	53045	Country	USA		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))					Family Name or Surname				
Paul A.					Wechter				
Inventor's Signature					Date		4/14/04		
RESIDENCE: City	Milwaukee	State	WI	Country	USA	Citizenship	USA		
POST OFFICE ADDRESS		1502 East Hartford Avenue							
City	Milwaukee	State	WI	Zip	53211	Country	USA		

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01 (8/96)		DECLARATION		Attorney Docket Number	4919-00004
		OR		First Named Inventor	Bradley G. Trimble
<input type="checkbox"/> Declaration Submitted with Initial Filing		<input type="checkbox"/> Declaration Submitted after Initial Filing		COMPLETE IF KNOWN	
				Application Number	
				Filing Date	
				Group Art Unit	
				Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OBJECT LOCATING SYSTEM INCLUDING ADDRESSABLE REMOTE TAGS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT

International Number (If applicable). and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or §365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

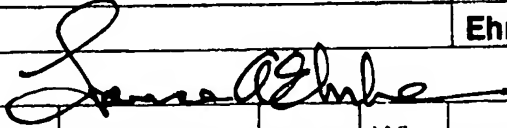
I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional <input type="checkbox"/> Application numbers are listed on a supplemental priority sheet attached hereto.
60/157,955 60/225,208	10/08/1999 8/14/2000	

Type a plus sign (+) inside this box [+]

DECLARATION							
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George H. Solveson		25,927		Jeffrey S. Sokol		35,686	
Gary A. Essmann		29,376		William L. Falk		27,709	
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Please direct all correspondence to:							
<input checked="" type="checkbox"/> Customer Number or Bar Code Label				26753		<input checked="" type="checkbox"/> Correspondence address below	
NAME		Joseph D. Kuborn (Reg. No. 40,889) ANDRUS, SCEALES, STARKE & SAWALL, LLP					
ADDRESS		100 East Wisconsin Avenue Suite 1100					
CITY		Milwaukee		STATE		Wisconsin	
COUNTRY		U.S.A.		TELEPHONE		(414) 271-7590	
				ZIP CODE		53202-4178	
				FAX		(414) 271-5770	
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Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))				Family Name or Surname			
Bradley G.				Trimble			
Inventor's Signature						Date	
RESIDENCE: City		Milwaukee		State		WI	
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POST OFFICE ADDRESS		2544 South Shore Drive					
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Lance A.				Ehrke				
Inventor's Signature				Date 4/14/09				
RESIDENCE: City		Brookfield	State	WI	Country	USA	Citizenship	USA
POST OFFICE ADDRESS		18305 Benington Drive						
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Approved for use through 9/30/00

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PTO/SB/01 (8/96) DECLARATION <div style="display: flex; justify-content: space-around;"><div>Declaration <input type="checkbox"/> Submitted with Initial Filing</div><div>OR</div><div>Declaration <input type="checkbox"/> Submitted after Initial Filing</div></div>	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 40%;">Attorney Docket Number</td><td>4919-00004</td></tr><tr><td>First Named Inventor</td><td>Bradley G. Trimble</td></tr><tr><td colspan="2" style="text-align: center;">COMPLETE IF KNOWN</td></tr><tr><td>Application Number</td><td></td></tr><tr><td>Filing Date</td><td></td></tr><tr><td>Group Art Unit</td><td></td></tr><tr><td>Examiner Name</td><td></td></tr></table>	Attorney Docket Number	4919-00004	First Named Inventor	Bradley G. Trimble	COMPLETE IF KNOWN		Application Number		Filing Date		Group Art Unit		Examiner Name	
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(Title of the Invention)

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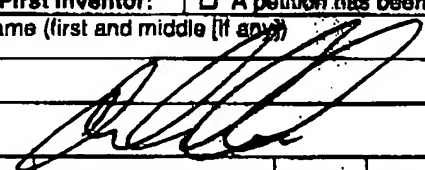
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<p>Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor</p>							
Given Name (first and middle (if any))				Family Name or Surname			
Bradley G.				Trimble			
Inventor's Signature						Date	
						4.16.09	
RESIDENCE: City		Milwaukee		State		WI	
				Country		USA	
				Citizenship		USA	
POST OFFICE ADDRESS		2544 South Shore Drive					
City		Milwaukee		State		WI	
				Zip		53207	
				Country		USA	
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Lance A.		Ehrke	
Inventor's Signature		Date	
RESIDENCE: City	Brookfield	State	WI
		Country	USA
		Citizenship	USA
POST OFFICE ADDRESS		18305 Benington Drive	
City	Brookfield	State	WI
		Zip	53045
		Country	USA

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Paul A.		Wechter	
Inventor's Signature		Date	
RESIDENCE: City	Milwaukee	State	WI
		Country	USA
		Citizenship	USA
POST OFFICE ADDRESS		1502 East Hartford Avenue	
City	Milwaukee	State	WI
		Zip	53212
		Country	USA